

### General

### Title

Pancreatic resection: volume.

## Source(s)

AHRQ quality indicators. Guide to inpatient quality indicators: quality of care in hospitals - volume, mortality, and utilization [version 3.1]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2007 Mar 12. 91 p.

AHRQ quality indicators. Inpatient quality indicators: technical specifications [version 4.2]. IQI #2 pancreatic resection volume. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2010 Sep. 1 p.

### Measure Domain

## Primary Measure Domain

Structure

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

## Secondary Measure Domain

Outcome

## **Brief Abstract**

## Description

This measure is used to assess the raw volume of provider-level pancreatic resection (surgical procedure).

As a volume indicator, pancreatic resection is a proxy measure for quality and should be used with other indicators.

### Rationale

About 30% of personal health care expenditures in the United States go towards hospital care, and the rate of growth in spending for hospital services has only recently leveled out after several years of increases following a half a decade of declining growth. Simultaneously, concerns about the quality of health care services have reached a crescendo with the Institute of Medicine's series of reports describing the problem of medical errors and the need for a complete restructuring of the health care system to improve the quality of care. Policymakers, employers, and consumers have made the quality of care in U.S. hospitals a top priority and have voiced the need to assess, monitor, track, and improve the quality of inpatient care.

Pancreatic resection is a rare procedure that requires technical proficiency; and errors in surgical technique or management may lead to clinically significant complications, such as sepsis, anastomotic breakdown, and death. Higher volumes have been associated with better outcomes, which represent better quality.

#### Note:

The following caveats were identified from the literature review for the "Pancreatic Resection Volume" indicator:

*Proxy*<sup>b</sup>: Indicator does not directly measure patient outcomes but an aspect of care that is associated with the outcome; thus, it is best used with other indicators that measure similar aspects of care.

Easily manipulated $^{a}$ : Use of the indicator may create perverse incentives to improve performance on the indicator without truly improving quality of care.

Refer to the original measure documentation for further details.

- a The concern is theoretical or suggested, but no specific evidence was found in the literature.
- b Indicates that the concern has been demonstrated in the literature.

### Primary Clinical Component

Pancreatic resection; procedure volume

## **Denominator Description**

This measure applies to providers of pancreatic resection (one provider at a time).

## **Numerator Description**

Discharges, age 18 years and older, with International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) codes for pancreatic resection procedure (526, 527)

Exclude cases:

Major Diagnostic Category (MDC) 14 (pregnancy, childbirth, and puerperium)

# Evidence Supporting the Measure

## Evidence Supporting the Criterion of Quality

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

# Evidence Supporting Need for the Measure

### Need for the Measure

Variation in capacity

### Evidence Supporting Need for the Measure

AHRQ quality indicators. Guide to inpatient quality indicators: quality of care in hospitals - volume, mortality, and utilization [version 3.1]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2007 Mar 12. 91 p.

### State of Use of the Measure

### State of Use

Current routine use

### Current Use

External oversight/State government program

Internal quality improvement

Quality of care research

# Application of Measure in its Current Use

## Care Setting

Hospitals

## Professionals Responsible for Health Care

Physicians

## Lowest Level of Health Care Delivery Addressed

Single Health Care Delivery Organizations

## Target Population Age

Does not apply to this measure

## Target Population Gender

Does not apply to this measure

## Stratification by Vulnerable Populations

# Characteristics of the Primary Clinical Component

### Incidence/Prevalence

Most facilities perform 10 or fewer pancreatectomies for cancer during a 5-year period; therefore, this indicator is expected to have poor precision; however, relatively strong relationships between volume and outcome -- specifically postoperative mortality -- have been noted in the literature.

## Evidence for Incidence/Prevalence

AHRQ quality indicators. Guide to inpatient quality indicators: quality of care in hospitals - volume, mortality, and utilization [version 3.1]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2007 Mar 12. 91 p.

### Association with Vulnerable Populations

Unspecified

### Burden of Illness

Unspecified

### Utilization

Unspecified

#### Costs

Unspecified

# Institute of Medicine (IOM) Healthcare Quality Report Categories

### IOM Care Need

Not within an IOM Care Need

### **IOM Domain**

Not within an IOM Domain

# Data Collection for the Measure

### Case Finding

Does not apply to this measure

### **Denominator Sampling Frame**

Does not apply to this measure

### **Denominator Inclusions/Exclusions**

Inclusions

This measure applies to providers of pancreatic resection (one provider at a time).

Exclusions

Unspecified

# Relationship of Denominator to Numerator

Does not apply to this measure

### Denominator (Index) Event

Does not apply to this measure

### **Denominator Time Window**

Does not apply to this measure

## Numerator Inclusions/Exclusions

Inclusions

Discharges, age 18 years and older, with International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) codes for pancreatic resection procedure (526, 527)

Exclusions

Exclude cases:

Major Diagnostic Category (MDC) 14 (pregnancy, childbirth, and puerperium)

# Measure Results Under Control of Health Care Professionals, Organizations and/or Policymakers

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

### Numerator Time Window

Institutionalization

### **Data Source**

Administrative data

### Level of Determination of Quality

Does not apply to this measure

### **Outcome Type**

Proxy for Outcome

### Pre-existing Instrument Used

Unspecified

# Computation of the Measure

### Scoring

Count

## Interpretation of Score

Better quality is associated with a higher score

### Allowance for Patient Factors

Does not apply to this measure

## Standard of Comparison

External comparison at a point in time

External comparison of time trends

Internal time comparison

Prescriptive standard

## Prescriptive Standard

### Benchmark:

Threshold 1: 10 or more procedures per year Threshold 2: 11 or more procedures per year

## **Evidence for Prescriptive Standard**

# **Evaluation of Measure Properties**

### **Extent of Measure Testing**

Each potential quality indicator was evaluated against the following six criteria, which were considered essential for determining the reliability and validity of a quality indicator: face validity, precision, minimum bias, construct validity, fosters real quality improvement, and application. The project team searched Medline for articles relating to each of these six areas of evaluation. Additionally, extensive empirical testing of all potential indicators was conducted using the 1995-97 Healthcare Cost and Utilization Project (HCUP) State Inpatient Databases (SID) and Nationwide Inpatient Sample (NIS) to determine precision, bias, and construct validity. Table 2 in the original measure documentation summarizes the results of the literature review and empirical evaluations on the Inpatient Quality Indicators. Refer to the original measure documentation for details.

### Evidence for Reliability/Validity Testing

AHRQ quality indicators. Guide to inpatient quality indicators: quality of care in hospitals - volume, mortality, and utilization [version 3.1]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2007 Mar 12. 91 p.

# **Identifying Information**

## **Original Title**

IQI #2 pancreatic resection volume.

### Measure Collection Name

Agency for Healthcare Research and Quality (AHRQ) Quality Indicators

### Measure Set Name

Inpatient Quality Indicators

### Submitter

Agency for Healthcare Research and Quality - Federal Government Agency [U.S.]

### Developer

Agency for Healthcare Research and Quality - Federal Government Agency [U.S.]

## Funding Source(s)

### Composition of the Group that Developed the Measure

The Agency for Healthcare Research and Quality (AHRQ) Quality Indicators are in the public domain and the specifications come from multiple sources, including the published and unpublished literature, users, researchers, and other organizations. AHRQ as an agency is responsible for the content of the indicators.

### Financial Disclosures/Other Potential Conflicts of Interest

None

### **Endorser**

National Quality Forum - None

## Adaptation

Measure was not adapted from another source.

### Release Date

2002 Jun

### **Revision Date**

2010 Sep

### Measure Status

This is the current release of the measure.

This measure updates previous versions:

AHRQ quality indicators. Guide to inpatient quality indicators: quality of care in hospitals -- volume, mortality, and utilization [version 3.0]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2006 Feb 20. 99 p.

AHRQ quality indicators. Inpatient quality indicators: technical specifications [version 4.1]. IQI #2 pancreatic resection volume. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2009 Dec 1. 1 p.

## Source(s)

AHRQ quality indicators. Guide to inpatient quality indicators: quality of care in hospitals - volume, mortality, and utilization [version 3.1]. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2007 Mar 12. 91 p.

AHRQ quality indicators. Inpatient quality indicators: technical specifications [version 4.2]. IQI #2 pancreatic resection volume. Rockville (MD): Agency for Healthcare Research and Quality (AHRQ); 2010 Sep. 1 p.

### Measure Availability

Indicators Web site.
page at the Agency for Healthcare Research and Quality (AHRQ) Quality
are available in Portable Document Format (PDF) from the Inpatient Quality Indicators Resources
and "AHRQ Quality Indicators. Inpatient Quality Indicators: Technical Specifications." These documents
Guide to Inpatient Quality Indicators: Quality of Care in Hospitals Volume, Mortality, and Utilization"
The individual measure, "IQI #2 Pancreatic Resection Volume," is published in "AHRQ Quality Indicators.

For more information, please contact the QI Support Team at support@qualityindicators.ahrq.gov.

### **Companion Documents**

The following are available:

Rockville (MD): Agency f	or Healthcare Research and	: software documentation, SAS [version 4 Quality (AHRQ); 2010 Sep. 41 p. This doc the Agency for Healthcare Research and	cument
(AHRQ) Quality Indicator			Quanty
for Healthcare Research from the AHRQ Quality I AHRQ quality indicators.	and Quality (AHRQ); 2010 Jundicators Web site Inpatient quality indicators	rindows [version 4.1a]. Rockville (MD): Agul 2. 97 p. This document is available in F	PDF ort.
. , -		Quality (AHRQ); 2008 Mar. various p. This	5
	PDF from the AHRQ Quality	indicators web site es GM, Geppert J, McClellan M, et al. Refi	 nement
of the HCUP quality indic	cators. Rockville (MD): Agend	cy for Healthcare Research and Quality (A	AHRQ);
	Comparative data for the IO	I based on the 2008 Nationwide Inpatient	t
•	,	for Healthcare Research and Quality (AHI	
		om the AHRQ Quality Indicators Web site	
AHRQ quality indicator. I	Risk adjustment coefficients	for the IQI [version 4.2]. Rockville (MD):	Agency
for Healthcare Research the AHRQ Quality Indica		ep. 20 p. This document is available in Pl	DF from
AHRQ quality indicators.	Composite measures user g	uide for the inpatient quality indicators (	IQI)
[version 4.2]. Rockville (	MD): Agency for Healthcare	Research and Quality (AHRQ); 2010 Sep.	6 p.
This document is availab	le in PDF from the AHRQ $\operatorname{Qu}$ .	ality Indicators Web site	
HCUPnet: a tool for iden	tifying, tracking, and analyz	ing national hospital statistics. [Web site	<b>a].</b>
Rockville (MD): Agency f	or Healthcare Research and	Quality (AHRQ); [accessed 2011 May 24].	
HCUPnet is available fro	m the AHRQ Web site	. See the related	
QualityTools	summary.		

## **NQMC Status**

This NQMC summary was completed by ECRI on August 19, 2004. The information was verified by the measure developer on October 13, 2004. This NQMC summary was updated by ECRI on March 4, 2005. The information was verified by the measure developer on April 22, 2005. This NQMC summary was updated by ECRI Institute on August 17, 2006, on May 29, 2007, on October 20, 2008 and again on August 27, 2010. This NQMC summary was reviewed and edited by ECRI on July 13, 2011.

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